

POSITION	INITIALS	ID NC	DATE
FEE DETERMINATION	<i>[Signature]</i>		06-08-01
O.I.P.E. CLASSIFIER		12/1118	06-08-01
FORMALITY REVIEW	TH		
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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